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Date: 29-Sep-05

To: Christy L. Novacek Fax: 571-273-8300 Phone: 571-272-1839
United States Patent and Trademark Office

From: Michael D. Plimier Fax: 408-765-7723 Phone: 408-765-7857

Subject: Amendment and Response for Application Serial No. 10/771,267

A CONFIRMATION COPY OF THIS DOCUMENT:

WILL NOT BE SENT

Application No.: 10/771,267
Filing Date: February 2, 2004
First Named Inventor: Justin K. Brask et al.
Group Art Unite: 2822
Examiner Name: Novacek, Christy L.
Attorney Docket No.: P15744C

Enclosures:

1. Transmittal form (1 page)
2. Fee Transmittal for FY 2005 (1 page in duplicate)
3. Amendment and Response (8 page)

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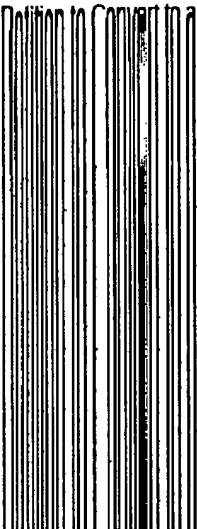
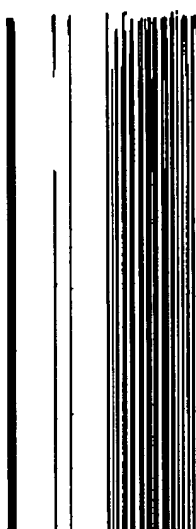
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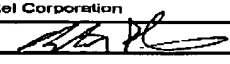
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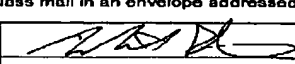
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/771.267
	Filing Date	February 2, 2004
	First Named Inventor	Justin K. Brask et al.
	Art Unit	2822
	Examiner Name	Novacek, Christy L.
	Attorney Docket Number	P15744C
Total Number of Pages in This Submission		11

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition  <input type="checkbox"/> Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD <input type="checkbox"/> Remarks _____	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): _____

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Intel Corporation		
Signature			
Printed name	Michael D. Pilmar		
Date	September 29, 2005	Reg. No.	43,004

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Signature			
Typed or printed name	Michael D. Pilmar	Date	September 29, 2005

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4918).**FEE TRANSMITTAL
For FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

0.00

Complete If Known

Application Number	10/771,267
Filing Date	February 2, 2004
First Named Inventor	Justin K. Brask et al.
Examiner Name	Novacek, Christy L.
Art Unit	2822
Attorney Docket No.	P15744C

METHOD OF PAYMENT (check all that apply)

- ☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
- ☒ Deposit Account Deposit Account Number: 50-0221 Deposit Account Name: Intel Corporation
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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	0
Design	200	100	100	50	130	65	0
Plant	200	100	300	150	160	80	0
Reissue	300	150	500	250	600	300	0
Provisional	200	100	0	0	0	0	0

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues) Fee (\$)

Each independent claim over 3 (including Reissues) Fee (\$)

Multiple dependent claims Fee (\$)

Fee (\$)	Small Entity Fee (\$)
50	25
200	100
360	180

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)** **Multiple Dependent Claims**

HP = highest number of total claims paid for, if greater than 20.
 $\text{Indep. Claims} - 20 \text{ or HP} = \text{Extra Claims}$
 $\text{Fee} (\$) \times \text{Extra Claims} = \text{Fee Paid} (\$)$

HP = highest number of independent claims paid for, if greater than 3.
 $\text{Indep. Claims} - 3 \text{ or HP} = \text{Extra Claims}$
 $\text{Fee} (\$) \times \text{Extra Claims} = \text{Fee Paid} (\$)$

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets - 100 = Extra Sheets / 50 = Number of each additional 50 or fraction thereof Fee (\$)

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge):

SUBMITTED BY

Signature

Michael D. Plimfor

Registration No.

43,004

Telephone 408-765-7857

Name (Print/Type)

Michael D. Plimfor

Date September 29, 2005

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/771,267
		Filing Date	February 2, 2004
		First Named Inventor	Justin K. Brask et al.
		Examiner Name	Novacek, Christy L.
		Art Unit	2822
TOTAL AMOUNT OF PAYMENT (\$) 0.00		Attorney Docket No.	P15744C

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 50-0221 Deposit Account Name: Intel Corporation

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
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Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	0
Design	200	100	100	50	130	65	0
Plant	200	100	300	150	160	80	0
Reissue	300	150	500	250	600	300	0
Provisional	200	100	0	0	0	0	0

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims	Extra Claims	Fee (\$)
- 20 or HP = _____ x _____ = _____		0
HP = highest number of total claims paid for, if greater than 20.		
Indep. Claims	Extra Claims	Fee (\$)
- 3 or HP = _____ x _____ = _____		0
HP = highest number of independent claims paid for, if greater than 3.		


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Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____				0

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)	Fees Paid (\$)
Other (e.g., late filing surcharge): _____	0

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent) 43,004	Telephone 408-766-7857
Name (Print/Type)	Michael D. Plimler	Date September 29, 2005	

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Attorney's Docket No.: P15744C

SEP 29 2005

Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Justin K. Brask et al.

U.S. Serial No: 10/771,267

Filed: February 2, 2004

For: **A METHOD FOR MAKING A
SEMICONDUCTOR DEVICE
HAVING A HIGH-K GATE
DIELECTRIC**

Examiner: Novacek, Christy L.

Art Unit: 2822

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450AMENDMENT AND RESPONSE

Dear Sir:

This is in response to the Office Action mailed July 1, 2005. Applicant respectfully requests the Examiner to enter the following amendments and consider the following remarks.

Amendment to the Specification is reflected in the listing of Specification amendments that begins on page 2 of this paper. **Amendments to the Claims** are reflected in the listing of claims that begins on page 3 of this paper. **Remarks/Arguments** begin on page 6 of this paper.